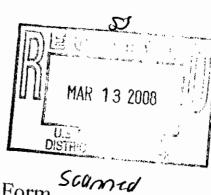
Civil Action No. D7CV812-5CR

United States District Court For the District of Delaware



Acknowledgement of Service Form For Service By Return Receipt

Attached below is a return receipt card reflecting proof of service upon the named party on the date show.

•	07-812-5LR
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X B. Received by (Printed Name) D. Is delivery andress different from item?
1. Article Addressed to:	If YES, enfer delivery address below 1000 1000 1000 1000 1000 1000 1000 10
	3. Service Type Certified Mail Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7007 2480 (Transfer from service label)	0 0003 3006 5911
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540